NEW HAMPSHIRE DEPARTMENT OF REVENUE ADMINISTRATION ESTIMATED FIDUCIARY BUSINESS TAX QUARTERLY PAYMENT FORMS 2003 Estimated Tax Worksheet (Keep for your records – Do not file)

	2003 Estillated Tax Worksheet (N	cep ioi	your records	= DO HOL HIE)		1			
1	ESTIMATED TAX BASE AND/OR GROSS BUSINESS PROFITS			ВЕТ(а)	BP [.]	Γ(b)			
	a BET Taxable Base after Apportionment								
	b NH Taxable Business Profits after Apportionment								
2	TAX								
	a Line 1(a) x .0075								
	• •				///////////////////////////////////////				
	b Line 1(b) x .085		<u> </u>						
3	CREDITS								
	a RSA 162-L, CDFA (Investment Tax Credit)								
	b RSA 77-A:5 (Please be sure to include the BET Credit)								
4	Estimated tax for current year [Line 2 minus Line 3(a) and/or 3(b)]								
5	Overpayment from last year								
6	Balance of Business Taxes Due (Line 4 minus Line 5)	<u></u>							
	COMPUTATION and	RECO	RD of PAYMI	ENTS					
	Amount of each Installment	:		Total Du	e	CALENDAR YEAR			
	Date Paid BET (1/4 of Line 6 of workshee	t) Bl	PT	(BET and/or	BPT)	DUE DATES			
1.	\$ \$			\$		April 15, 2003			
2.	\$			\$		June 16, 2003			
3.	\$ \$ \$			\$		Sept. 15, 2003			
4.	\$ \$ \$			\$		Dec. 15, 2003.			
						<u> </u>			
	ESTIMATED TAX FO								
	Line 1 Enter ¼ of the Business Enterprise Tax Line 2 Enter ¼ of the Business Profits Tax ca				et above.				
Line 3 Enter the TOTAL payment sum of Lines 1 and 2.									
	IMPORTANT:								
T	THE PENALTY PROVISIONS OF RSA 21-J:32 WILL APPLY IF THE ESTIMATE REQUIREMENTS HAVE NOT BEEN MET.								
_	(Cut along this line)								
Г	NEW HAMPSHIRE DEPARTMENT OF R	REVENUE	ADMINISTRATIO	ON					
	722 ESTIMATED FIDUCIARY BU	JSINES	S TAX - 2003						
	· 				EOR DE	DA LISE ONLY			
Fo	or the CALENDAR year 2003 or other taxable period beginning		and endir	ıg		RA USE ONLY			
	Mo PLEASE PRINT OR TYPE	Day Y	′ear	Mo Day `	/ear				
FC	DR DRA USE ONLY NAME OF ESTATE OR TRUST		FEDERAL EI	MPLOYER IDENTIFICA	ATION NUMBE	R			
	NUMBER AND STREET ADDRESS								
	ADDRESS (continued)		☐ ¼ Business E	Interprise Tax 1	\$				
	CITY/TOWN, STATE & ZIP CODE		1/4 Business P	rofits Tax 2	\$				
			Amount of T	his Payment 3	\$				
	MAIL DOCUMENT PROCESSING DIVISION		Make checks	payable to: STAT	E OF NEW	HAMPSHIRE your payment with			
	TO: PO BOX 637 CONCORD NH 03302-0637		this estimate	e. Do not file a	a \$0 estim	ate. NH-1041-ES			
		40	1			Rev. 10/02			

FORM NH-1041-ES

NEW HAMPSHIRE DEPARTMENT OF REVENUE ADMINISTRATION

ESTIMATED FIDUCIARY BUSINESS TAX - 2003

722

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For the CALENDA	R year 2003 or other taxable period beginning	and ending Year Mo Day Year	
	Mo Day PLEASE PRINT OR TYPE	Year Mo Day Year	
	NAME OF ESTATE OR TRUST	FEDERAL EMPLOYER IDENTIFICATION NUMBER	
FOR DRA USE ONLY	NUMBER AND STREET ADDRESS		
	NOMBER AND STREET ADDRESS		
	ADDRESS (continued)	1/4 Business Enterprise Tax 1 \$	
	CITY/TOWN, STATE & ZIP CODE	1/4 Business Profits Tax 2 \$	
	CITI/TOWN, STATE & ZIF CODE		
		Amount of This Payment 3 \$	
	NH DEPT OF REVENUE ADMINISTRATION MAIL DOCUMENT PROCESSING DIVISION	Make checks payable to: STATE OF NEW HAI	MPSHIRE
	TO: PO BOX 637	Enclose, but do not staple or tape, your this estimate. Do not file a \$0 estimate.	payment with
	CONCORD NH 03302-0637	this estimate. Do not the a 50 estimate.	NH-1041-ES Rev. 10/02
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FORM	NEW HAMPSHIRE DEPARTMENT OF REVEN	NUE ADMINISTRATION	
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		FOR DRA US	E ONLY
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OR DRA USE ONLY	NAME OF ESTATE OR TRUST	FEDERAL EMPLOYER IDENTIFICATION NUMBER	
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	TO MEDITALE STREET ABOUTED	1/ 5	
	ADDRESS (continued)	1/4 Business Enterprise Tax 1 \$	
	OLTA/TOWN OTATE & ZID CODE	1/4 Business Profits Tax 2 \$	
	CITY/TOWN, STATE & ZIP CODE	74 Business Fronts Tax 2 \psi	
		Amount of This Payment 3 \$	
	NH DEPT OF REVENUE ADMINISTRATION	Make checks payable to: STATE OF NEW HAI	MDCHIDE
	MAIL DOCUMENT PROCESSING DIVISION TO: PO BOX 637	Enclose, but do not staple or tape, your	
	TO: PO BOX 637 CONCORD NH 03302-0637	this estimate. Do not file a \$0 estimate.	NH-1041-ES
			Rev. 10/02
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FORM	NEW HAMPSHIRE DEPARTMENT OF REVEI	NUE ADMINISTRATION	
NH-1041-E	ESTIMATED FIDUCIARY BUSIN	ESS TAX - 2003	
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		FOR DRA US	E ONLY
or the CALENDA	R year 2003 or other taxable period beginning	and ending	
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	PLEASE PRINT OR TYPE	FEDERAL FAIRLOVER INFAITIFICATION AND INFER	
FOR DRA USE ONLY	NAME OF ESTATE OR TRUST	FEDERAL EMPLOYER IDENTIFICATION NUMBER	
	NUMBER AND STREET ADDRESS		
		1/ Dunings Entermain Town 4 (2)	
	ADDRESS (continued)	1/4 Business Enterprise Tax 1 \$	
		1/ Rusinoss Profits Toy	
	CITY/TOWN, STATE & ZIP CODE	1/4 Business Profits Tax 2 \$	
		Amount of This Payment 3 \$	
	NH DEPT OF REVENUE ADMINISTRATION		
	MAIL DOCUMENT PROCESSING DIVISION	Make checks payable to: STATE OF NEW HAI	MPSHIRE
	TO: PO BOX 637	Enclose, but do not staple or tape, your this estimate. Do not file a \$0 estimate.	
	CONCORD NH 03302-0637	John Commuter Do not me a wo estimate.	NH-1041-ES Rev. 10/02
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